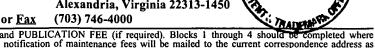
PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450



INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

7590

01/08/2004

Irving Keschner **Suite 1150** 21515 Hawthorne Boulevard Torrance, CA 90503

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

(Depositor's name (Signature (Date

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/078,572	02/20/2002	Patrick T. McMullen	•	5055

TITLE OF INVENTION: METHOD AND APPARATUS FOR PROVIDING THREE AXIS MAGNETIC BEARING HAVING PERMANENT MAGNETS MOUNTED ON RADIAL POLE STACK

APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE TOTAL		E(S) DUE	DATE DUE
nonprovisional	YES	\$665		\$300	\$96	55	04/08/2004
EXAMINER		ART UNIT		CLASS-SUBCLASS			
MULLINS, BURTON S		2834		310-090500	_		
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			1 <i>IRVING</i> -	KESCHWER

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

CALNETIX	CERRITOS	ALIFORA	MA			
Please check the appropriate assignee category or category	gories (will not be printed on the patent);	□ individual	corporation or other private group en	ntity 🚨 government		
4a. The following fee(s) are enclosed:	4b. Payment of Fee(s):					
🖼 Išsue Fee	A check in the amo	ount of the fee(s)	is enclosed.			
Publication Fee	☐ Payment by credit	☐ Payment by credit card. Form PTO-2038 is attached.				
☐ Advance Order - # of Copies	☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number(enclose an extra copy of this form).					
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This collection of information is required by 37 CF	R 1.311. The information is required to	: 02/23/20	004 FMETEKI2 00000100 10078572	2		
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